

HOUSE JOINT RESOLUTION 1026

By Bowers

A RESOLUTION to designate August 15, 2004, and each August 15 thereafter as "Tennessee Chronic Kidney Disease Education Day."

WHEREAS, today, more than 20 million Americans, approximately one in nine adults, have a form of Chronic Kidney Disease (CKD). Of these, more than 8 million have seriously reduced kidney functions that, if left untreated, may progress to a more severe level, (Stage 5), of CKD. This stage of CKD is commonly referred to as renal failure or End-Stage Renal Disease (ESRD); and

WHEREAS, the cost of kidney dialysis in Tennessee is \$42,000 of Medicare dollars per patient per year for an average of 5 years and the annual cost of transplantation in Tennessee is \$80,000 per patient; and

WHEREAS, Healthy People 2010 has recognized kidney disease as a major national health problem in America and a joint initiative by the National Institutes of Health and the National Kidney Foundation is in place to educate providers and patients about the need for earlier treatment in the disease process; and

WHEREAS, Chronic Kidney Disease afflicts 287,000 Tennesseans and is an epidemic in our state; and

WHEREAS, Tennesseans most severely affected by CKD include 6,406 Tennesseans receiving dialysis treatments in 125 dialysis centers, 355 Tennesseans living with transplanted kidneys, and another 1,204 Tennesseans on the waiting list for an organ transplant; and

WHEREAS, the combined financial impact of this devastating disease on Tennessee's health care system is \$220 million annually; and

WHEREAS, African-Americans comprise 30 percent of kidney failure patients in Tennessee and are among those at highest risk for undiagnosed Chronic Kidney Disease; and

WHEREAS, simple, cost-effective means are available to identify and diagnose chronic kidney disease and associated life threatening complications; and

WHEREAS, cost-effective means can determine level of kidney function and provide information for clinicians about therapeutic interventions that may preserve kidney function, sustain life, and delay progression to End-Stage Renal Disease (ESRD) and/or renal transplantation; and

WHEREAS, evidence-based clinical guidelines have been developed by scientists and renal experts and published in peer reviewed journals; and

WHEREAS, the broad dissemination of peer reviewed, published, clinical guidelines on the management of CKD within the state's hospitals, among its health care professionals and to ordinary citizens, most especially those with diabetes, high blood pressure, and those with a relative on dialysis, could save the lives of countless Tennesseans; and

WHEREAS, ESRD is usually the result of years of Chronic Kidney Disease caused by diabetes mellitus, high blood pressure, inherited conditions, or other insult to the kidneys; and

WHEREAS, uncontrolled high blood pressure is the second leading cause of kidney disease in the United States, accounting for 26% of new ESRD cases in 1999; and

WHEREAS, public policy initiatives targeted at early identification, controlling cardiovascular risk factors, and early intervention in those with diabetes mellitus and high blood pressure can reduce the serious long-term effects of CKD on the population, and the significant economic burden on individuals and society; now, therefore,

BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE ONE HUNDRED THIRD GENERAL ASSEMBLY OF THE STATE OF TENNESSEE, THE SENATE CONCURRING, that we hereby designate August 15, 2004, and each August 15 hereafter as "Tennessee Chronic Kidney Disease Education Day," and would urge all Tennesseans to familiarize themselves with the causes of Chronic Kidney Disease and the importance of intervention to promote sustained health and a better quality of life.

BE IT FURTHER RESOLVED, that an appropriate copy of this resolution be prepared for presentation with this final clause omitted from such copy.